PTO/SB/05 (08-03)

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UTILITY
PATENT APPLICATION
TRANSMITTAL

Attom	ey Docket No.	AIA-0154	
First II	nventor	Hiroshi Fukuzaki	0
Title	COAXIAL CO	ONNECTOR WITH SWITCH	U.S. PT
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IKANSIVIITIAL	'''' \	COAXIAL CONNEC		WITH SWITCH	35. 35		
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express	Mail Label No.			~~		
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application con		ADDRESS TO: Co	ommissio O. Box 1		17548		
1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. 3. X Specification [Total Pages 21 (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 3 5. Oath or Declaration [Total Sheets 3 a. X Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	9 1 3 1 1 1	Alexandria, VA 22313-1450 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper of Computer Papers (cover sheet & document(s)) 7. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. X Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of Attorney 11. English Translation Document (if applicable) 12. X Information Disclosure Statement (IDS)/PTO-1449 X Copies of IDS Statement (IDS)/PTO-1449 13. Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. X Certified Copy of Priority Document(s) (if foreign priority is claimed)					
6. Application Data Sheet. See 37 CFR 1.76	17. X Other: Associate Power of Attorney						
8. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.							
		DENCE ADDRESS					
X Customer Number: 23353		OR	Correspondence address below				
RADER, FISHMAN & GRAUER PLLC							
Address 1233 20th Street, N.W. Suite 501							
City Washington Stat		OC	Zip Code				
Country US Tele	ephone (202) 955-3750	F	ex (202) 955-3751			
Name (Print/Type) Carl Schaukowitch		Registration No. (Attorr	29,211				
Signature au Scr		Date April 14, 200					

PTO/SB/17 (10-03)

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CCC TO A NOMITTAL			Complete if Known						
FEE TRANSMITTAL	1	Application Number Not Yet Assigned				ssigned			
for FY 2004		Filing Date				Concurrently Herewith			
			First Named Inventor			Hiroshi Fukuzaki			
Effective 10/01/2003, Patent fees are subject to annual revision.	[Examiner Name			N	Not Yet Assigned			
Applicant claims small entity status. See 37 CFR 1.27	Art Unit			N	N/A				
TOTAL AMOUNT OF PAYMENT (\$) 770.00	Attorney Docket No. AIA-0154								
METHOD OF PAYMENT (check all that apply)				FEE	CALCULA	TION (co	ntinued)		
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**or number previously paid, if greater; For Reissues, see above							. 1-1 [17]		
SUBMITTED BY						(Complete	(if applicable))		
		ation No y/Agent)	29	,211	'or'	Telephone	(703) 955-3750	**	
Signature (a.0 1/0		, , , , , , , ,					April 14, 2004		
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